Check the box next to the best description of your cause of action. Choose only one: Prisoner Civil Rights Non-Prisoner Civil Rights Personal Injury/Tort Tax Collection Practices Employment Discrimination Other (specify) IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA FOR THE DISTRICT OF MONTANA				
BILLINGS		DIVISION		
(You must fill in this blan	k. See Ins	truction 6.)		
(Full name of Plaintiff and prisoner number	er, if any)	Cause No(to be filled in by Cler	k of Court)	
Plaintiffs,		COMPLAINT		
vs.		Iver Trial Domondad		
SENATOR JOHN TESTER,		Jury Trial Demanded Jury Trial Not Demanded	⊠	
SENATOR MAX BAUCUS,				
REPRESENTATIVE DENNIS REHBEI (Full name of each defendant. Do not use				
Defendants.				
INSTRUCTIONS				
Use this form to file a civil complaint with Montana. You may attach additional page.			istrict of	
2. Your complaint must include only count citations.	:s/causes o	f action and facts – not legal argun	nents or	
Plaintiff's Last Name DUST		Complaint (Revi Pag	sed 5/09) e 1 of 7	

- 3. Your complaint must be typed or legibly handwritten. All pleadings and other papers submitted for filing must be on 8 ½" x 11" paper (letter size). Each plaintiff must sign the complaint (see page 7). The signatures need not be notarized. However, each signature must be an original and not a copy. You must pay the Clerk for copies of your complaint or other court records, even if you are proceeding in forma pauperis. The cost for copies is \$0.50 per page and prepayment is required.
- 4. The filing fee for a complaint is \$350.00. The filing fee is set by Congress and cannot be changed by the Court. In addition, you will be required to pay the cost of serving the complaint on each of the defendants. If you are unable to prepay the entire filing fee and service costs for this action, you may move to proceed in forma pauperis. Your complaint will be returned to you without filing if it is not accompanied by either the full filing fee or a motion to proceed in forma pauperis. Please note that prisoners proceeding in forma pauperis are required to pay the full filing fee in installments.
- 5. Complaints submitted by persons proceeding in forma pauperis and complaints submitted by prisoners suing a governmental entity or employee are reviewed by the Court before the defendants are required to answer. See 28 U.S.C. §§ 1915(e)(2), 1915A(a); 42 U.S.C. § 1997e(c). After the Court completes the review process, you will receive an Order explaining the findings and any further action you may or must take. The review process may take a few months; each case receives the judge's individual attention.
- 6. Pursuant to Standing Order DWM 27, "no prisoner may maintain more than two (2) civil actions in forma pauperis at one time, unless the prisoner shows that he or she is under imminent danger of serious physical injury."
- 7. The case caption (page 1 of this form) must indicate the proper Division for filing. A Division where the alleged wrong(s) occurred is a proper Division. When you have completed your complaint, mail the *original* of your complaint and either the full filing fee or your motion to proceed in forma pauperis to the proper Division:

Billings Division: Clerk of U.S. District Court, 316 N. 26th, Room 5405, Billings, MT 59101 (Big Horn, Carbon, Carter, Custer, Dawson, Fallon, Garfield, Golden Valley,

McCone, Musselshell, Park, Petroleum, Powder River, Prairie, Richland,

Rosebud, Stillwater, Sweetgrass, Treasure, Wheatland, Wibaux or

Yellowstone County)

Butte Division: Clerk of U.S. District Court, 400 N. Main St., Federal Bldg. Rm. 303, Butte,

MT 59701

(Beaverhead, Deer Lodge, Gallatin, Madison, or Silver Bow County)

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Great Falls Division:	Falls, MT (Blaine, Ca Liberty, Ph County)		Daniels, Fergus, osevelt, Sherida	Glacier, Hill, Judi an, Teton, Toole, o	ith Basin,
Helena Division:	(Broadwat	S. District Court, 9 er, Jefferson, Lewis State Prison is loca	& Clark, Meag	gher, or Powell Co	
Missoula Division:	Missoula,	ne U.S. District Cou MT 59807 Granite, Lake, Linc		•	
<u>COMPLAINT</u>					
	I. P	PLACE OF CON	NFINEMEN'	Г	
A. Are you incarcerated? Yes □ No 🂢 (if No, go to Part II)					
B. If yes, where ar	e you cum	rently incarcerate	ed?		
C. If any of the inc	•	ving rise to your	complaint oc	curred in a diffe	erent
II. EXI	HAUSTI(ON OF ADMIN	ISTRATIVE	REMEDIES	
A. Non-Prisoners					
		ion alleged in thi es before filing i			
2. If yes, have you exhausted your administrative remedies? Yes \square No \square					
Plaintiff's Last Name	DUS	т		Complaint (Re	vised 5/09) age 3 of 7

B. Prisoners	(If you listed other institution	ons in I.C above,	, please answer	for each instit	tution).
1. Is ther	e a grievance procedure	in your curren	nt institution?	Yes □	No □
-	ou fully exhaust the admi where the incidents at is	•	-		•
3. If you	did not fully exhaust the	e grievance pro	ocess, explain	why:	
	III. PARTIES T	O CURRENT	T LAWSUIT		
A. Plaintiff_	JOHN DUST	is a citizen of			,
	: 4:		(State)		
presently res	iding at <u>37 washing</u> Mailing ad	ron st. # 11 dress or place	of confineme	S,MONT.	591 01
	(IVIAIIII)S aa	aress or prace		,,,,,	
B. Defendan	t <u>john tester</u>	is a citizen o	of <u>monta</u>	NA	,
			(State)		
employed as	SENTTOR (Position and Title, if an	at_ <u>united</u>	STATES CON	GRESS	 .
	(Position and Title, if an	у)	(Institution/O	rganization	1)
Defendant	MAX BAUCUS is	s a citizen of	MONTANA		
	2110005	_	(State)		'
employed as	SENATOR	at_ UNITE	STATES CO	NGRESS	·
((Position and Title, if an	y)	(Institution/O	rganization	1)
Dafandant -		::4: C			
Defendant	DENNIS REHBERG is	s a citizen oi _	<u>MONTANA</u> (State)		_,
employed as	REPRESENTATIVE	at marmi	ED STATES C	ONCRECC	
	(Position and Title, if an		(Institution/O	rganization	1)
(NOTE : If more "APPENDIX A:	e space is needed to furnish the PARTIES").	above information	n, continue on a b	olank sheet lab	eled
			Con	nplaint (Revis	ed 5/09)
Plaintiff's Last	Name DUST			•	2 4 of 7

IV. STATEMENT OF CLAIMS

A. Count I (State your cause of action, e.g., how have your constitutional rights been violated): THE MONTANA CONGRESSIONAL DELEGATION HAS AUTHORED THE 2009
CROW WATER SETTLEMENT ACT. THE WATER ACT HAS WAIVED MY WATER RIGHTS
Date of incident (S).
Supporting Facts: (Include all facts you consider important, including names of persons involved, places, and dates. State the facts clearly in your own words without citing legal arguments, cases, or statutes). THE HONORABLE CONGRESSMEN HAVE FAILED TO ACKNOWLEDGE ATTEMPTS ON
DISCUSSION OR NEGOTIATION OF WATER ON THE ALLOTTEE'S LAND.
AS AN ALLOTTEE LANDOWNER I OWN REAL PROPERTY RIGHTS AS PART OF
AN ALLOTMENT. THE REAL PROPERTY INCLUDE WATER RIGHTS.
 Defendants Involved: (List the name of each defendant involved in this claim and specifically describe what each defendant did or did not do to allegedly cause your injury). THE MONTANA CONGRESSIONAL DELEGATION BY ENACTING THE * 1
2009 WATERSETTLEMENT ACT ARE VIOLATING THE 5TH AND 14TH OF THE
U.S. CONSTITUTION WHICH PROTECT MY PROPERTY RIGHTS INCLUDING
WATER RIGHTS.
(NOTE : For each additional claim, use a blank sheet labeled "APPENDIX B. STATEMENT OF CLAIMS." You must set forth two paragraphs for each count, one consisting of Supporting Facts (following the directions under $IV(A)(1)$), and one consisting of Defendants Involved (following the directions under $IV(A)(2)$).
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V. INJURY

Describe the injuries you suffered as a result of each individual defendant's
actions. (Do no cite legal arguments, cases, or statutes).
I HAVE NOTIFED THE MONTANA CONGRESSIONAL DELEGATION -
THE 2009 CROW WATER SETTLEMENT ACT WAIVES MY WATER RIGHTS.
I HAVE NOT GIVEN MY CONSENT TO WAIVER MY WATER RIGHTS. THESE
LEARNED CONGRESSMEN HAVE IGNOREW AND VIOLATED MY RIGHTS
PROTECTED BY THE 5TH 14TH AMENDMENTS OF THE U.S. CONSTITION,
I HAVE INCLUDED SOME EXHIBITES WHICH ARE ATTACHED.
(NOTE: If more space is needed to furnish the above information, continue on a blank sheet labeled "APPENDIX C: INJURY").
VI. REQUEST FOR RELIEF
Describe the relief you request. (Do no cite legal arguments, cases, or statutes).
I PRAY THE COURT WILL UPHOLD MY CONSTITUTIONAL RIGHT TO
DUE PROCESS OF THE LAW.
(NOTE: If more space is needed to furnish the above information, continue on a blank sheet labeled "APPENDIX D: REQUEST FOR RELIEF").
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VII. PLAINTIFF'S DECLARATION

- A. I understand I must keep the Court informed of my current mailing address and my failure to do so may result in dismissal of this Complaint without notice to me.
- B. I understand the Federal Rules of Civil Procedure <u>prohibit</u> litigants filing civil complaints from using certain information in documents submitted to the Court. In order to comply with these rules, I understand that:
 - social security numbers, taxpayer identification numbers, and financial account numbers must include only the last four digits (e.g. xxx-xx-5271, xx-xxx5271, xxxxxxxx3567);
 - birth dates must include the year of birth only (e.g. xx/xx/2001); and
 - names of persons under the age of 18 must include initials only (e.g. L.K.).

If my documents (including exhibits) contain any of the above listed information, I understand it is my responsibility to black that information out before sending those documents to the Court.

I understand I am responsible for protecting the privacy of this information.

- C. I declare under penalty of perjury that I am the plaintiff in this action, I have read this complaint, and the information I set forth herein is true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621.

D. (Prisoners Only) This Copostage prepaid or paid b	1	e prison system for legal mail,
		, 20
Executed at	on	, 20
(Location)	(Date)	
<u></u>	Joh Out	
Sig	gnature of Plaintiff	
(If there is more than one Plainti	ff, each Plaintiff must sign the con page).	nplaint using a separate declarations
	1 5 /	Complaint (Revised 5/09)
Plaintiff's Last Name	II e m	Page 7 of 7

DUST